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## Problem Oriented Screening Instrument for Teenagers (POSIT)

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The POSIT, available in English and Spanish language versions, is a brief screening tool, using a yes/no response format, designed to identify problems and the potential need for service in 10 functional areas, including substance use/abuse, mental and physical health, family and peer relations, vocation, and special education.

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Target Population	Adolescents 12 through 19 years of age
Administrative Issues	139 items, 10 "scales" or problem areas Pencil and paper, computer, or audiotape self-administered; interview Time required: 20-25 minutes Administered by any office personnel. No qualifications necessary. No training required for administration A test administrator available to answer questions increases the response validity
Scoring	Time required: 2 minutes using POSIT scoring template Scored by test administrator or other office personnel Computerized scoring with interpretation available Risk-Adjusted scores sheet available
Psychometrics	Reliability studies done: Test-retest Internal consistency Measures of validity derived: Content Criterion (predictive, concurrent)

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### Clinical Utility of Instrument

The POSIT is a cost-efficient, easy-to-use problem screen for use with troubled adolescents who may have one or more problems amenable to treatment or to a combination of preventive services. The POSIT can be administered by staff in schools, the juvenile and family court system, and medical, psychiatric, alcohol and drug treatment programs as the first step toward determining those potentially problematic areas that require a more comprehensive, thus expensive, diagnostic assessment. The POSIT is useful in a case management system in conjunction with a community network of clinical services; it can also be used as a descriptive measure in program evaluation.

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### Research Applicability

The POSIT can be used to collect baseline data to comprehensively describe adolescent subject populations. The POSIT-Follow up Questionnaire can be used as a change measure.

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### Copyright, Cost, and Source Issues

No copyright or cost

To receive the POSIT and related scoring template, request a copy of the *Adolescent Assessment/Referral System Manual*, DHHS Publication No. (ADM) 91-1735, from:

National Clearinghouse for Alcohol and Drug Information  
P.O. Box 2345  
Rockville, MD 20847-2345  
1-800-729-6686

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1.	Do you have so much energy you don't know what to do with it?.....	Yes	No
2.	Do you brag?.....	Yes	No
3.	Do you get into trouble because you use drugs or alcohol at school?.....	Yes	No
4.	Do your friends get bored at parties when there is no alcohol served?.....	Yes	No
5.	Is it hard for you to ask for help from others?.....	Yes	No
6.	Has there been adult supervision at the parties you have gone to recently?.....	Yes	No
7.	Do your parents or guardians argue a lot?.....	Yes	No
8.	Do you usually think about how your actions will affect others?.....	Yes	No
9.	Have you recently either lost or gained more than 10 pounds?.....	Yes	No
10.	Have you ever been intimate with someone who shot up drugs?.....	Yes	No
11.	Do you often feel tired?.....	Yes	No
12.	Have you had trouble with stomach pain or nausea?.....	Yes	No
13.	Do you get easily frightened?.....	Yes	No
14.	Have any of your best friends dated regularly during the past year?.....	Yes	No
15.	Have you dated regularly in the past year?.....	Yes	No
16.	Do you have a skill, craft, trade or work experience?.....	Yes	No
17.	Are most of your friends older than you are?.....	Yes	No
18.	Do you have less energy than you think you should?.....	Yes	No
19.	Do you get frustrated easily?.....	Yes	No
20.	Do you threaten to hurt people?.....	Yes	No

21.	Do you feel alone most of the time?.....	Yes	No
22.	Do you sleep either too much or too little?.....	Yes	No
23.	Do you swear or use dirty language?.....	Yes	No
24.	Are you a good listener?.....	Yes	No
25.	Do your parents or guardians approve of your friends?.....	Yes	No
26.	Have you lied to anyone in the past week?.....	Yes	No
27.	Do your parents or guardians refuse to talk with you when they are mad at you?.....	Yes	No
28.	Do you rush into things without thinking about what could happen?.....	Yes	No
29.	Did you have a paying job last summer?.....	Yes	No
30.	Is your free time spent just hanging out with friends?.....	Yes	No
31.	Have you accidentally hurt yourself or someone else while high on alcohol or drugs?....	Yes	No
32.	Have you had any accidents or injuries that still bother you?.....	Yes	No
33.	Are you a good speller?.....	Yes	No
34.	Do you have friends who damage or destroy things on purpose?.....	Yes	No
35.	Have the whites of your eyes ever turned yellow?.....	Yes	No
36.	Do your parents or guardians usually know where you are and what you are doing?.....	Yes	No
37.	Do you miss out on activities because you spend too much money on drugs or alcohol?.....	Yes	No
38.	Do people pick on you because of the way you look?.....	Yes	No
39.	Do you know how to get a job if you want one?.....	Yes	No
40.	Do your parents or guardians and you do lots of things together?.....	Yes	No

41.	Do you get A's and B's in some classes and fail others?.....	Yes	No
42.	Do you feel nervous most of the time?.....	Yes	No
43.	Have you stolen things?.....	Yes	No
44.	Have you ever been told you are hyperactive?.....	Yes	No
45.	Do you ever feel you are addicted to alcohol or drugs?.....	Yes	No
46.	Are you a good reader?.....	Yes	No
47.	Do you have a hobby you are really interested in?.....	Yes	No
48.	Do you plan to get a diploma (or already have one)?.....	Yes	No
49.	Have you been frequently absent or late for work?.....	Yes	No
50.	Do you feel people are against you?.....	Yes	No
51.	Do you participate in team sports which have regular practices?.....	Yes	No
52.	Have you ever read a book cover to cover for your own enjoyment?.....	Yes	No
53.	Do you have chores that you must regularly do at home?.....	Yes	No
54.	Do your friends bring drugs to parties?.....	Yes	No
55.	Do you get into fights a lot?.....	Yes	No
56.	Do you have a hot temper?.....	Yes	No
57.	Do your parents or guardians pay attention when you talk to them?.....	Yes	No
58.	Have you started using more and more drugs or alcohol to get the effect you want?.....	Yes	No
59.	Do your parents or guardians have rules about what you can and cannot do?.....	Yes	No
60.	Do people tell you that you are careless?.....	Yes	No

61.	Are you stubborn?.....	Yes	No
62.	Do any of your best friends go out on school nights without permission from their parents or guardians?.....	Yes	No
63.	Have you ever had or do you now have a job?.....	Yes	No
64.	Do you have trouble getting your mind off things?.....	Yes	No
65.	Have you ever threatened anyone with a weapon?.....	Yes	No
66.	Do you have a way to get to a job?.....	Yes	No
67.	Do you ever leave a party because there is no alcohol or drugs?.....	Yes	No
68.	Do your parents or guardians know what you really think or feel?.....	Yes	No
69.	Do you often act on the spur of the moment?.....	Yes	No
70.	Do you usually exercise for a half hour or more at least once a week?.....	Yes	No
71.	Do you have a constant desire for alcohol or drugs?.....	Yes	No
72.	Is it easy to learn new things?.....	Yes	No
73.	Do you have trouble with your breathing or with coughing?.....	Yes	No
74.	Do people your own age like and respect you?.....	Yes	No
75.	Does your mind wander a lot?.....	Yes	No
76.	Do you hear things no one else around you hears?.....	Yes	No
77.	Do you have trouble concentrating?.....	Yes	No
78.	Do you have a valid driver's license?.....	Yes	No
79.	Have you ever had a paying job that lasted at least one month?.....	Yes	No
80.	Do you and your parents or guardians have frequent arguments which involve yelling and screaming?.....	Yes	No

81.	Have you had a car accident while high on alcohol or drugs?.....	Yes	No
82.	Do you forget things you did while drinking or using drugs?.....	Yes	No
83.	During the past month have you driven a car while you were drunk or high? .....	Yes	No
84.	Are you louder than other kids?.....	Yes	No
85.	Are most of your friends younger than you are?.....	Yes	No
86.	Have you ever intentionally damaged someone else's property?.....	Yes	No
87.	Have you ever stopped working at a job because you just didn't care?.....	Yes	No
88.	Do your parents or guardians like talking with you and being with you?.....	Yes	No
89.	Have you ever spent the night away from home when your parents didn't know where you were?.....	Yes	No
90.	Have any of your best friends participated in team sports which require regular practices?.....	Yes	No
91.	Are you suspicious of other people?.....	Yes	No
92.	Are you already too busy with school and other adult supervised activities to be interested in a job?.....	Yes	No
93.	Have you cut school at least 5 days in the past year?.....	Yes	No
94.	Are you usually pleased with how well you do in activities with your friends?.....	Yes	No
95.	Does alcohol or drug use cause your moods to change quickly like from happy to sad or vice versa?.....	Yes	No
96.	Do you feel sad most of the time?.....	Yes	No
97.	Do you miss school or arrive late for school because of your alcohol or drug use?.....	Yes	No
98.	Is it important to you now to get or keep a satisfactory job?.....	Yes	No
99.	Do your family or friends ever tell you that you should cut down on your drinking or drug use?.....	Yes	No

100.	Do you have serious arguments with friends or family members because of your drinking or drug use?.....	Yes	No
101.	Do you tease others a lot?.....	Yes	No
102.	Do you have trouble sleeping?.....	Yes	No
103.	Do you have trouble with written work?.....	Yes	No
104.	Does your alcohol or drug use ever make you do something you would not normally do - like breaking rules, missing curfew, or breaking the law?.....	Yes	No
105.	Do you feel you lose control and get into fights?.....	Yes	No
106.	Have you ever been fired from a job?.....	Yes	No
107.	During the past month, have you skipped school?.....	Yes	No
108.	Do you have trouble getting along with any of your friends because of your alcohol or drug use?.....	Yes	No
109.	Do you have a hard time following directions?.....	Yes	No
110.	Are you good at talking your way out of trouble?.....	Yes	No
111.	Do you have friends who have hit or threatened to hit someone without any real reason?.....	Yes	No
112.	Do you ever feel you can't control your alcohol or drug use?.....	Yes	No
113.	Do you have a good memory?.....	Yes	No
114.	Do your parents or guardians have a pretty good idea of your interests?.....	Yes	No
115.	Do your parents or guardians usually agree about how to handle you?.....	Yes	No
116.	Do you have a hard time planning and organizing?.....	Yes	No
117.	Do you have trouble with math?.....	Yes	No
118.	Do your friends cut school a lot?.....	Yes	No



119.	Do you worry a lot?.....	Yes	No
120.	Do you find it difficult to complete class projects or work tasks?.....	Yes	No
121.	Does school sometimes make you feel stupid?.....	Yes	No
122.	Are you able to make friends easily in a new group?.....	Yes	No
123.	Do you often feel like you want to cry?.....	Yes	No
124.	Are you afraid to be around people?.....	Yes	No
125.	Do you have friends who have stolen things?.....	Yes	No
126.	Do you want to be a member of any organized group, team, or club?.....	Yes	No
127.	Does one of your parents or guardians have a steady job?.....	Yes	No
128.	Do you think it's a bad idea to trust other people?.....	Yes	No
129.	Do you enjoy doing things with people your own age?.....	Yes	No
130.	Do you feel you study longer than your classmates and still get poorer grades?.....	Yes	No
131.	Have you ever failed a grade in school?.....	Yes	No
132.	Do you go out for fun on school nights without your parents' permission?.....	Yes	No
133.	Is school hard for you?.....	Yes	No
134.	Do you have an idea about the type of job or career that you want to have?.....	Yes	No
135.	On a typical day, do you watch more than two hours of TV?.....	Yes	No
136.	Are you restless and can't sit still?.....	Yes	No
137.	Do you have trouble finding the right words to express what you are thinking?.....	Yes	No
138.	Do you scream a lot?.....	Yes	No
139.	Have you ever had sexual intercourse without using a condom?.....	Yes	No

# POST QUESTIONNAIRE ANSWER SHEET

NAME:

DATE:

1.	Yes	No		31.	Yes	No		61.	Yes	No		91.	Yes	No		121.	Yes	No	
2.	Yes	No		32.	Yes	No		62.	Yes	No		92.	Yes	No		122.	Yes	No	
3.	Yes	No		33.	Yes	No		63.	Yes	No		93.	Yes	No		123.	Yes	No	
4.	Yes	No		34.	Yes	No		64.	Yes	No		94.	Yes	No		124.	Yes	No	
5.	Yes	No		35.	Yes	No		65.	Yes	No		95.	Yes	No		125.	Yes	No	
6.	Yes	No		36.	Yes	No		66.	Yes	No		96.	Yes	No		126.	Yes	No	
7.	Yes	No		37.	Yes	No		67.	Yes	No		97.	Yes	No		127.	Yes	No	
8.	Yes	No		38.	Yes	No		68.	Yes	No		98.	Yes	No		128.	Yes	No	
9.	Yes	No		39.	Yes	No		69.	Yes	No		99.	Yes	No		129.	Yes	No	
10.	Yes	No		40.	Yes	No		70.	Yes	No		100.	Yes	No		130.	Yes	No	
11.	Yes	No		41.	Yes	No		71.	Yes	No		101.	Yes	No		131.	Yes	No	
12.	Yes	No		42.	Yes	No		72.	Yes	No		102.	Yes	No		132.	Yes	No	
13.	Yes	No		43.	Yes	No		73.	Yes	No		103.	Yes	No		133.	Yes	No	
14.	Yes	No		44.	Yes	No		74.	Yes	No		104.	Yes	No		134.	Yes	No	
15.	Yes	No		45.	Yes	No		75.	Yes	No		105.	Yes	No		135.	Yes	No	
16.	Yes	No		46.	Yes	No		76.	Yes	No		106.	Yes	No		136.	Yes	No	
17.	Yes	No		47.	Yes	No		77.	Yes	No		107.	Yes	No		137.	Yes	No	
18.	Yes	No		48.	Yes	No		78.	Yes	No		108.	Yes	No		138.	Yes	No	
19.	Yes	No		49.	Yes	No		79.	Yes	No		109.	Yes	No		139.	Yes	No	
20.	Yes	No		50.	Yes	No		80.	Yes	No		110.	Yes	No					
21.	Yes	No		51.	Yes	No		81.	Yes	No		111.	Yes	No					
22.	Yes	No		52.	Yes	No		82.	Yes	No		112.	Yes	No					
23.	Yes	No		53.	Yes	No		83.	Yes	No		113.	Yes	No					
24.	Yes	No		54.	Yes	No		84.	Yes	No		114.	Yes	No					
25.	Yes	No		55.	Yes	No		85.	Yes	No		115.	Yes	No					
26.	Yes	No		56.	Yes	No		86.	Yes	No		116.	Yes	No					
27.	Yes	No		57.	Yes	No		87.	Yes	No		117.	Yes	No					
28.	Yes	No		58.	Yes	No		88.	Yes	No		118.	Yes	No					
29.	Yes	No		59.	Yes	No		89.	Yes	No		119.	Yes	No					
30.	Yes	No		60.	Yes	No		90.	Yes	No		120.	Yes	No					

# POST QUESTIONNAIRE SCORING TEMPLATE

NAME:

DATE:

1.		C, F	31.		A	61.		J	91.		J	121.		F
2.		J	32.		B	62.		I	92.		G	122.		H
3.		A	33.		F	63.		G	93.		C	123.		C
4.		E	34.		E	64.		C, F	94.		H	124.		C
5.		H	35.		B	65.		J	95.		A	125.		E
6.		I	36.		D	66.		G	96.		C	126.		I
7.		D	37.		A	67.		A	97.		A	127.		G
8.		H	38.		B	68.		D	98.		G	128.		H
9.		B	39.		G 16+	69.		C, F, H	99.		A	129.		H
10.		B	40.		D	70.		I	100.		A	130.		F
11.		C	41.		F	71.		A	101.		J	131.		G
12.		B	42.		C	72.		F	102.		C	132.		I
13.		C	43.		J	73.		B	103.		F	133.		F
14.		I	44.		C, F	74.		H	104.		A	134.		G
15.		I	45.		A	75.		F	105.		C	135.		I
16.		G	46.		F	76.		C	106.		G 16+	136.		C, F
17.		H, E	47.		I	77.		C	107.		J	137.		F
18.		B, F	48.		G	78.		G 16+	108.		A	138.		J
19.		C, F	49.		G 16+	79.		G 16+	109.		C, F	139.		B
20.		J	50.		C	80.		D	110.		F, H			
21.		C, E	51.		I	81.		A	111.		E			
22.		B	52.		F	82.		A	112.		A			
23.		J	53.		G	83.		A	113.		F			
24.		F	54.		E	84.		J	114.		D			
25.		E	55.		J	85.		E	115.		D			
26.		J	56.		J	86.		J	116.		F			
27.		D	57.		D	87.		G 16+	117.		F			
28.		C, F, H	58.		A	88.		D	118.		E			
29.		G 16+	59.		D	89.		J	119.		C			
30.		I	60.		F	90.		I	120.		G			